U.S. UTILITY Patent Application    APPLICATION   FILING DATE   CLASS   SUBCLASS   GROUP ART UNIT   EXAMINER	u	P1)		PATENT NUMBER and ISSUE DATE				
APPLICATION NUMBER FILING DATE CLASS SUBCLASS GROUP ART UNIT EXAMINER	5271							
	15		FILING DATE	CLASS 346	SUBCLASS	GR	OUP ART UNIT	EXAMINER
					(FACE)		BEST AVAILABLE COPY	

NOTICE OF ALL	OWANCE MAILED		CLAIMS ALLOWED					
		Assistant Examiner	Total Claims		Int Claim for G			
ISS	UE FEE		DRAWING					
Amount Due	Date Paid	1	Sheets Drwg.	Figs.Drwg.	Print Fig.			
	141	Primary Examiner	Application Examiner					
TEF	RMINAL	PREPARED FOR ISSUE						
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